

ENTERED SEP 24 2012

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)Form Approved
OMB No. 2040-0004

SEP 20 2012

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: Eagle River WSD

ADDRESS: 846 Forest Road
Vail, CO 81657

FACILITY: VAIL WWTF

LOCATION: W OF LIONSHEAD LIFT/WEST SIDE
VAIL, CO 81657

ATTN: DENNIS GELVIN, GENERAL MGR.

CO0021369

PERMIT NUMBER

001-A

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 81657

MAJOR \$

(SUBR JC) EAGLE

POST CCC DISCHARGE TO GORE CRK

External Outfall

No Discharge ☐

FROM

MM/DD/YYYY

08/01/2012

TO

MM/DD/YYYY

08/31/2012

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total dissolved	SAMPLE MEASUREMENT	*****	*****	*****	*****	366	366	mg/L	X	1/30	COMP
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	mg/L		Monthly	COMPOS
Solids, total dissolved	SAMPLE MEASUREMENT	*****	*****	*****	*****	163	163	mg/L	X	1/30	COMP
70295 3 0 Intake Public Water	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	mg/L		Monthly	COMPOS
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	4	9	#/100mL	0	3/7	GRAB
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	695 30DA GM	1390 MX 7D GM	#/100mL		Three Per Week	GRAB
BOD, 5-day, percent removal	SAMPLE MEASUREMENT	*****	*****	*****	99	*****	*****	%	0	1/30	CALC
81010 K 0 Percent Removal	PERMIT REQUIREMENT	*****	*****	*****	85 MO AV MN	*****	*****	%		Monthly	CALCTD
Solids, suspended percent removal	SAMPLE MEASUREMENT	*****	*****	*****	99	*****	*****	%	0	1/30	CALC
81011 K 0 Percent Removal	PERMIT REQUIREMENT	*****	*****	*****	85 MO AV MN	*****	*****	%		Monthly	CALCTD
Oil and grease visual	SAMPLE MEASUREMENT	*****	0	—	*****	*****	*****	*****	X	7/7	VIS
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. INST MAX	Y=1;N=0	*****	*****	*****	*****		Daily	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Jim Edwards Plant Supervisor</i> TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE
		970 477-5414		09/14/2012
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Jim Edwards</i>		AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

OIL & GREASE - SEE FOOTNOTE I/, PG18. IF NO CHLORINE WAS USED, REPORT "NCT" (NO CHLORINE TREATMENT) - FOOTNOTE G/. REPORT INFLUENT SAMPLES ON 300I.

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: Eagle River WSD
ADDRESS: 846 Forest Road
Vail, CO 81657
FACILITY: VAIL WWTF
LOCATION: W OF LIONSHEAD LIFT/WEST SIDE
VAIL, CO 81657

CO0021369	001-A
PERMIT NUMBER	DISCHARGE NUMBER

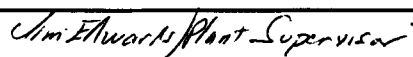
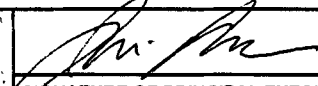
DMR Mailing ZIP CODE: 81657
MAJOR \$
(SUBR JC) EAGLE
POST CCC DISCHARGE TO GORE CRK
External Outfall

MONITORING PERIOD				
MM/DD/YYYY			MM/DD/YYYY	
FROM 08/01/2012		TO	08/31/2012	

ATTN: DENNIS GELVIN, GENERAL MGR.

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	*****	*****	*****	*****	2	4	mg/L	0	11/31	24HC
00310 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 30DA AVG	45 MX 7D AV	mg/L		Three Per Week	COMPOS
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.2	*****	7.4	SU	0	717	GRAB
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	9 MAXIMUM	SU		Daily	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	4	7	mg/L	0	317	24HC
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 30DA AVG	45 MX 7D AV	mg/L		Three Per Week	COMPOS
Nitrogen, ammonia total (as N)	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.2	0.2	mg/L	0	317	24HC
00610 1 8 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	2 30DA AVG	19 DAILY MX	mg/L		Three Per Week	COMPOS
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	—	—	—	N/A	—
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	10 INST MAX	mg/L		Contingent	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	1.3	1.6	MGD	*****	*****	*****	*****	0	CONT	REC.
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	2.7 30DA AVG	Req. Mon. DAILY MX	MGD	*****	*****	*****	*****		Continuous	RCORDR
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	NCT	—	—	—	—	—
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	.01 INST MAX	mg/L		Three Per Day	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  TYPED OR PRINTED	<small>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is true to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</small>	TELEPHONE 970 477-5414		DATE 09/14/2012
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA Code 970

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

OIL & GREASE - SEE FOOTNOTE I, PG18. IF NO CHLORINE WAS USED, REPORT "NCT" (NO CHLORINE TREATMENT) - FOOTNOTE G/. REPORT INFLUENT SAMPLES ON 3001.
PLEASE SEE ATTACHED LETTER REGARDING BOD.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

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OMB No. 2040-0004

SEP 20 2012

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FACILITY: VAIL WWTF

LOCATION: W OF LIONSHEAD LIFT/WEST SIDE
VAIL, CO 81657

ATTN: DENNIS GELVIN, GENERAL MGR.

CO0021369

PERMIT NUMBER

300-I

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 81657

MAJOR \$

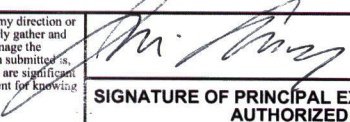
(SUBR JC) EAGLE

INFLUENT MEASUREMENTS

Influent Structure

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	2445	3233	161d	*****	218	249	mg/L	X	3/7	24HC
00310 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. MX 7D AV	lb/d	*****	Req. Mon. 30DA AVG	Req. Mon. MX 7D AV	mg/L		Three Per Week	COMPOS
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	260	352	mg/L	X	3/7	24HC
00530 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. MX 7D AV	mg/L		Three Per Week	COMPOS
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	1.4	1.6	MGD	*****	*****	*****	*****	X	CONT	REC
50050 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	MGD	*****	*****	*****	*****		Continuous	RCORDR

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TYPED OR PRINTED			970 477-5414	09/14/2012	
			AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

INFLUENT SAMPLES MUST BE COLLECTED, ANALYZED & REPORTED MONTHLY REGARDLESS OF WHETHER AN EFFLUENT DISCHARGE OCCURS. HYDRAULIC CAPACITY = 2.7 MGD; ORGANIC CAPACITY = 7,450 LBS BOD-5/DAY.

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FACILITY: VAIL WWTF

LOCATION: W OF LIONSHEAD LIFT/WEST SIDE
VAIL, CO 81657

ATTN: DENNIS GELVIN, GENERAL MGR.

CO0021369	MON-1
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD			
MM/DD/YYYY		MM/DD/YYYY	
FROM	08/01/2012	TO	08/31/2012

SEP 20 2012

DMR Mailing ZIP CODE: 81657

MAJOR \$


(SUBR JC) EAGLE

POST CCC DISCHARGE TO GORE CRK

External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	105	105	ug/L	X	1/30	24HC
00980 10 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	COMPOS
Iron, dissolved (as Fe)	SAMPLE MEASUREMENT	*****	*****	*****	*****	66	66	ug/L	X	1/30	24HC
01046 10 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	COMPOS
Manganese, dissolved (as Mn)	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.8	< 0.8	ug/L	X	1/30	24HC
01056 10 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	COMPOS

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TYPED OR PRINTED			970 477-5414	09/14/2012	
			AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

AFTER A MINIMUM OF 12 SAMPLES HAVE BEEN COLLECTED AND ANALYZED, PERMITTEE MAY REQUEST THAT A REASONABLE POTENTIAL ANALYSIS BE CONDUCTED.



**EAGLE RIVER
WATER & SANITATION DISTRICT**

846 Forest Road • Vail, Colorado 81657
(970) 476-7480 • FAX (970) 476-4089

August 30, 2012

Leslie Simpson
Domestic Unit Compliance Officer
Permits and Enforcement Section
Water Quality Control Division
Colorado Department of Health and Environment
4300 Cherry Creek Drive South
Denver, Colorado 80222-1530

RE: Invalid BOD result for Vail Effluent– August 6 and 7, 2012
NPDES Permit # CO-0021369

Dear Leslie Simpson:

The Vail effluent BOD results for August 6 and 7, 2012 were invalidated. On August 6 and 7, 2012, the Vail effluent result were not calculated because the polyseed did not deplete sufficiently. The polyseed factor is used to calculate the effluent BOD result. On August 8, the ERWSD Laboratory used the usual polyseed dilutions of 5, 6, and 7. All of the samples within those ranges did not deplete 2.0 mg/L rendering the result unacceptable under the guidelines set forth in *Standard Methods for the Examination of Water and Wastewater* (5210 B. 5-Day BOD Test). It was noticed that there was an unusual film on the inside of the BOD buffer bottle at the end of the test. We called HACH the manufacturer of the BOD buffer to see if this lot was bad, and they said 3 other customers had complained about lot #A2087. With this specific lot of BOD buffer, unusual BOD results were occurring. We discontinued the use of this lot of buffer and we have not had any problems with other BODs since this occurrence.

Please contact me at (970) 477-5439 if you have questions or need additional information.

Sincerely,

Leah Cribari
Laboratory Supervisor





**EAGLE RIVER
WATER & SANITATION DISTRICT**

846 Forest Road • Vail, Colorado 81657
(970) 476-7480 • FAX (970) 476-4089
www.erwsd.org

September 18, 2012

Ms. Leslie Simpson
Domestic Unit Compliance Officer
Permits and Enforcement Section
CDPHE, Water Quality Control Division
WQCD-PE-B2
4300 Cherry Creek Drive South
Denver, Colorado 80246-1530

Received
SEP 02 2012
Water Quality Control

Dear Ms. Simpson:

Enclosed are the Discharge Monitoring Reports for August 2012:

- AWWTF Permit # CO0024431
- EWWTF Permit # CO0037311
- VWWTF Permit # CO0021369

If you have any questions or need additional information please contact me at (970) 477-5431.

Sincerely,

Sam Pettigrew
AWWTF Supervisor

cc: Linn Brooks, General Manager
Todd Fessenden, Director of Operations
Siri Roman, Wastewater Manager
Jim Edwards, Plant Supervisor, Vail WWTP
Parker Newbanks, Plant Supervisor, Edwards WWTP

Enc. Avon WWTF Aug 2012 DMR
Vail WWTF Aug 2012 DMR
Edwards WWTF Aug 2012 DMR



WATER, WASTEWATER, OPERATIONS & MANAGEMENT SERVICES

